

# Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA  
2001/02  
FORM

COVER PAGE  
**460**

Page 1 of 27

For Official Use Only

Statement covers period

from 01/01/2018

through 03/31/2018

Date of election if applicable:  
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

## 1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☐ Officeholder, Candidate Controlled Committee  
☐ State Candidate Election Committee  
☐ Recall

(Also Complete Part 5.)

- ☐ General Purpose Committee  
☐ Sponsored  
☐ Small Contributor Committee  
☐ Political Party/Central Committee

- ☒ Ballot Measure Committee  
☒ Primary Formed  
☐ Controlled  
☒ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/  
Officeholder Committee  
(Also Complete Part 7.)

## 2. Type of Statement:

- ☐ Pre-election Statement  
☐ Semi-annual Statement  
☐ Termination Statement  
☒ Amendment (Explain below)

ADDING ACCRUED EXPENSE

- ☒ Quarterly Statement  
☐ Special Odd-Year Report  
☐ Supplemental Preelection  
Statement - Attach Form 495

## 3. Committee Information

I.D. NUMBER  
1400190

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE  
CALIFORNIA ASSOCIATION OF REALTORS

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SACRAMENTO	CA	95814	(213)624-6200

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LOS ANGELES	CA	90071	

OPTIONAL: FAX/E-MAIL ADDRESS  
(213) 623-1692 / cary@politicallaw.com

## Treasurer(s)

NAME OF TREASURER  
CARY DAVIDSON

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LOS ANGELES	CA	90071	(213) 624-6200

NAME OF ASSISTANT TREASURER, IF ANY  
FLORA YIN

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LOS ANGELES	CA	90071	(213) 624-6200

OPTIONAL: FAX/E-MAIL ADDRESS

## 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/23/2018 By CARY DAVIDSON  
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 07/23/2018 By ALEXANDER E. CREEL  
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on \_\_\_\_\_ By \_\_\_\_\_  
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on \_\_\_\_\_ By \_\_\_\_\_  
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
State of California

# Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA  
FORM **460**

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## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

**Related Committees Not Included in this Statement:** List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D.NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D.NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

## 6. Ballot Measure Committee

NAME OF BALLOT MEASURE

PEOPLE'S INITIATIVE TO PROTECT PROPOSITION 13 SAVINGS (17-0013A1)

BALLOT NO. OR LETTER

JURISDICTION

STATEWIDE

☒ SUPPORT  
☐ OPPOSE

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

ALEXANDER E. CREEL

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

## 7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT  
☐ OPPOSE

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period

from 01/01/2018

through 03/31/2018

CALIFORNIA  
FORM **460**

Page 3 of 27

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

## Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3	\$4,200,000.00	\$4,200,000.00
2. Loans Received .....	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS .....	Add Lines 1 + 2	\$4,200,000.00	\$4,200,000.00
4. Nonmonetary Contributions .....	Schedule C, Line 3	\$4,825.08	\$4,825.08
5. TOTAL CONTRIBUTIONS RECEIVED .....	Add Lines 3 + 4	\$4,204,825.08	\$4,204,825.08

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

## Expenditures Made

6. Payments Made .....	Schedule E, Line 4	\$4,877,396.50	\$4,877,396.50
7. Loans Made .....	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS .....	Add Lines 6 + 7	\$4,877,396.50	\$4,877,396.50
9. Accrued Expenses (Unpaid Bills) .....	Schedule F, Line 3	(\$292,739.76)	\$91,747.60
10. Nonmonetary Adjustment .....	Schedule C, Line 3	\$4,825.08	\$4,825.08
11. TOTAL EXPENDITURES MADE .....	Add Lines 8 + 9 + 10	\$4,589,481.82	\$4,973,969.18

## Expenditure Limit Summary for State Candidates

### 22. Cumulative Expenditures Made\* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy) Total to Date

## Current Cash Statement

# Current Cash Statement

12. Beginning Cash Balance .....	Previous Summary Page, Line 16	<u>\$1,738,802.74</u>	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is
13. Cash Receipts .....	Column A, Line 3 above	<u>\$4,200,000.00</u>	
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4	<u>\$2,500.00</u>	
15. Cash Payments .....	Column A, Line 8 above	<u>\$4,877,396.50</u>	
16. <b>ENDING CASH BALANCE</b> .....	Add Lines 12 + 13 + 14, then subtract Line 15	<u>\$1,063,906.24</u>	
If this is a termination statement, Line 16 must be zero.			

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$0.00

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents .....	See instructions on reverse	\$0.00
19. Outstanding Debts .....	Add Line 2 + Line 9 in Column B above	\$91,747.60

\*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

# Schedule A

## Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	03/31/2018	Page 4 of 27

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. Number  
1400190

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/8/2018	CALIFORNIA ASSOCIATION OF REALTORS ISSUES MOBILIZATION PAC LOS ANGELES, CA 90020 Committee ID: 782560	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,200,000.00	\$1,204,825.08	
1/9/2018	NATIONAL ASSOCIATION OF REALTORS CHICAGO, IL 60611	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500,000.00	\$3,000,000.00	
2/7/2018	NATIONAL ASSOCIATION OF REALTORS CHICAGO, IL 60611	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500,000.00	\$3,000,000.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

**SUBTOTAL** \$4,200,000.00

### Schedule A Summary

1. Amount received this period - contributions of \$100 or more.

(Include all Schedule A subtotals.) ..... \$4,200,000.00

2. Amount received this period - unitemized contributions of less than \$100 ..... \$0.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL** \$4,200,000.00

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)  
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# Schedule B – Part 1 Loans Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 1

Statement covers period  
from 01/01/2018  
through 03/31/2018

**CALIFORNIA FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		RATE %  RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		RATE %  RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		RATE %  RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	

## SUBTOTALS

## Schedule B Summary

1. Loans received this period. \_\_\_\_\_  
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period \_\_\_\_\_  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) \_\_\_\_\_ **Net** \_\_\_\_\_  
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on  
Schedule E, Line 3)

\* Amounts forgiven or paid by  
another party also must be  
reported on Schedule A.

\*\* If required.

\*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule B - Part 2

## Loan Guarantors

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from 01/01/2018 through 03/31/2018	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. Number

1400190

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER  DATE		CALENDAR YEAR  PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER  DATE		CALENDAR YEAR  PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER  DATE		CALENDAR YEAR  PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER  DATE		CALENDAR YEAR  PER ELECTION (IF REQUIRED)	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

# Schedule C

## Nonmonetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period from <u>01/01/2018</u> through <u>03/31/2018</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. Number  
1400190

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
2/9/2018	CALIFORNIA ASSOCIATION OF REALTORS ISSUES MOBILIZATION PAC LOS ANGELES, CA 90020  Committee ID: 782560	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		CONSULTING AND DESIGN OF DOORHANGER	\$4,825.08	\$1,204,825.08	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$4,825.08

## Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more. (Include all Schedule C subtotals.).....	\$4,825.08
2. Amount received this period - unitemized nonmonetary contributions of less than \$100 .....	\$0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .....	<b>TOTAL</b> \$4,825.08

\*Contributor Codes  
 IND - Individual  
 COM- Recipient Committee  
       (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

**Schedule D**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period		SCHEDULE D	
from	01/01/2018	CALIFORNIA FORM 460	
through	03/31/2018	Page 8 of 27	
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190	

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> Monetary Contribution				
		<input type="checkbox"/> Nonmonetary Contribution				
		<input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution				
		<input type="checkbox"/> Nonmonetary Contribution				
		<input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution				
		<input type="checkbox"/> Nonmonetary Contribution				
		<input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL						
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**Schedule D Summary**

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) ..... \_\_\_\_\_
2. Unitemized contributions and independent expenditures made this period of under \$100 ..... \_\_\_\_\_
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL** \_\_\_\_\_



# Schedule E Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period from 01/01/2018 through 03/31/2018	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Commonwealth Computers Sacramento, CA 96864	OFC			\$4,968.98
Praveen Sharma Temecula, CA 92592	OFC			\$106.00
LAIZA NEGRETE SACRAMENTO, CA 95814	POS			\$496.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

## Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) .....	\$4,877,277.79
2. Unitemized payments made this period of under \$100. ....	\$118.71
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .....	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .....	<b>TOTAL</b> \$4,877,396.50

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2018		
through 03/31/2018		Page 10 of 27
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
WINNER & MANDABACH CAMPAIGNS SANTA MONICA, CA 90401	CNS			\$50,000.00
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$370,650.00
LAW OFFICE OF ANDREAS C. ROCKAS SACRAMENTO, CA 95814	PRO			\$6,000.00
Downey Brand LLP Sacramento, CA 95814	PRO			\$25,000.00
The Monaco Group Santa Ana, CA 92705	PET			\$11,802.40

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2018		
through 03/31/2018		Page 11 of 27
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KELLY SERVICES, INC. RANCHO CORDOVA, CA 95670	SAL			\$2,492.63
Monique Moreno Sacramento, CA 95817	OFC			\$250.50
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$260,320.00
KELLY SERVICES, INC. RANCHO CORDOVA, CA 95670	SAL			\$1,033.18
WINNER & MANDABACH CAMPAIGNS SANTA MONICA, CA 90401	CNS			\$50,083.51

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2018		
through 03/31/2018		Page 12 of 27
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$311,605.00
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$249,040.00
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$206,010.00
KAVANAGH RHOMBERG LLP BELMONT, CA 94002	PRO			\$1,598.00
LAIZA NEGRETE SACRAMENTO, CA 95814	POS			\$649.82

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2018		
through 03/31/2018		Page 13 of 27
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
LAW OFFICE OF ANDREAS C. ROCKAS SACRAMENTO, CA 95814	PRO			\$6,000.00
Dr. Adrian R. Fleissig Tustin, CA 92782	CNS			\$5,000.00
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$319,483.50
The Monaco Group Santa Ana, CA 92705	PET			\$16,200.63
The Monaco Group Santa Ana, CA 92705	PET			\$6,430.35

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through 03/31/2018		Page 14 of 27
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Cristina B. Gutierrez Sacramento, CA 95833	PET			\$1,500.00
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$337,410.00
CALIFORNIA ASSOCIATION OF REALTORS LOS ANGELES, CA 90020	SAL			\$7,837.36
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$465,185.00
The Monaco Group Santa Ana, CA 92705	PET			\$5,921.11

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 01/01/2018 through 03/31/2018		<b>CALIFORNIA FORM 460</b>  Page 15 of 27
I.D. NUMBER 1400190		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Aaron, Thomas & Associates, Inc. Chatsworth, CA 91311	LIT			\$9,417.75
Cristina B. Gutierrez Sacramento, CA 95833	PET			\$500.00
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$673,222.30
WINNER & MANDABACH CAMPAIGNS SANTA MONICA, CA 90401	CNS			\$52,604.36
KAVANAGH RHOMBERG LLP BELMONT, CA 94002	PRO			\$282.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2018		
through 03/31/2018		Page 16 of 27
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$790,240.00
REED & DAVIDSON, LLP LOS ANGELES, CA 90071	PRO		CARY DAVIDSON, TREASURER, AND FLORA YIN, ASSISTANT TREASURER, ARE PARTNERS OF REED & DAVIDSON, LLP.	\$6,000.00
LAW OFFICE OF ANDREAS C. ROCKAS SACRAMENTO, CA 95814	PRO			\$6,000.00
KELLY SERVICES, INC. RANCHO CORDOVA, CA 95670	SAL			\$60.00
VOTER SURVEYS & CONSULTING LLC TOMBALL, TX 77375	POL			\$85,275.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**



# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2018		
through 03/31/2018		Page 17 of 27
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET			\$457,138.00
BASK DIGITAL MEDIA, LLC SAN DIEGO, CA 92101	WEB			\$10,000.00
BASK DIGITAL MEDIA, LLC SAN DIEGO, CA 92101	WEB			\$5,000.00
BASK DIGITAL MEDIA, LLC SAN DIEGO, CA 92101	WEB			\$110.31
CALIFORNIA ASSOCIATION OF REALTORS LOS ANGELES, CA 90020	SAL			\$31,354.10

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL**

# Schedule E (Continuation Sheet) Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2018		
through 03/31/2018		Page 18 of 27
NAME OF FILER HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS		I.D. NUMBER 1400190

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CAPITOL MATRIX CONSULTING, LLC LINCOLN, CA 95648	CNS			\$27,000.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL** \$4,877,277.79

# Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE F

Statement covers period  
from 01/01/2018  
through 03/31/2018

CALIFORNIA  
FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
RANDLE COMMUNICATIONS, LLC SACRAMENTO, CA 95814	OFC	\$0.00	\$375.17	\$0.00	\$375.17
RANDLE COMMUNICATIONS, LLC SACRAMENTO, CA 95814	CNS	\$0.00	\$30,000.00	\$0.00	\$30,000.00
RANDLE COMMUNICATIONS, LLC SACRAMENTO, CA 95814	MTG	\$0.00	\$1,061.75	\$0.00	\$1,061.75

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

## SUBTOTALS

## Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$91,747.60
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$384,487.36
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** (\$292,739.76)  
May be a negative number.

**Schedule F  
(Continuation Sheet)  
Accrued Expenses (Unpaid Bills)**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 01/01/2018  
through 03/31/2018

**CALIFORNIA  
FORM 460**  
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NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, email)            |

\*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
RANDLE COMMUNICATIONS, LLC SACRAMENTO, CA 95814	CNS	\$0.00	\$30,000.00	\$0.00	\$30,000.00
KELLY SERVICES, INC. RANCHO CORDOVA, CA 95670	SAL	\$0.00	\$151.73	\$0.00	\$151.73
AAP HOLDING COMPANY, INC WESTLAKE VILLAGE, CA 91361	PET	\$370,650.00	\$0.00	\$370,650.00	\$0.00
LAW OFFICE OF ANDREAS C. ROCKAS SACRAMENTO, CA 95814	PRO	\$6,000.00	\$0.00	\$6,000.00	\$0.00

**SUBTOTALS**

**Schedule F  
(Continuation Sheet)  
Accrued Expenses (Unpaid Bills)**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 01/01/2018  
through 03/31/2018

**CALIFORNIA  
FORM 460**

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NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, email)            |

\*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
CALIFORNIA ASSOCIATION OF REALTORS LOS ANGELES, CA 90020	SAL	\$7,837.36	\$0.00	\$7,837.36	\$0.00
KELLY SERVICES, INC. RANCHO CORDOVA, CA 95670	SAL	\$0.00	\$158.95	\$0.00	\$158.95
RANDLE COMMUNICATIONS, LLC SACRAMENTO, CA 95814	CNS	\$0.00	\$30,000.00	\$0.00	\$30,000.00
<b>SUBTOTALS</b>		\$384,487.36	\$91,747.60	\$384,487.36	\$91,747.60

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	03/31/2018	Page 22 of 27

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
AAP HOLDING COMPANY, INC

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CHRIS BRENTLINGER BAY AREA PETITIONS SANTA CRUZ, CA 95062	PET			\$226,137.50
COAST TO COAST CAMPAIGNS, INC. HOLLYWOOD, FL 33021	PET			\$635,872.00
DIRECT DEMOCRACY LOS ANGELES, CA 90039	PET			\$679,726.20
DISCOVERY PETITION MANAGEMENT RIVER PINES, CA 95375	PET			\$278,200.50

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$1819936.20

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	03/31/2018	Page 23 of 27

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
AAP HOLDING COMPANY, INC

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
PEREGRINE INK, LLC SCOTTS VALLEY, CA 95066	PET			\$427,283.50
SCHMITT CONSULTING INC. FRIANT, CA 93626	PET			\$217,340.50
STUDIO WEST PETITIONS PASADENA, CA 91030	PET			\$137,561.50
VOTER DIRECT RESEDA, CA 91335	PET			\$682,854.00

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$1465039.50

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
AAP HOLDING COMPANY, INC

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
YOUR CHOICE PETITIONS SPOKANE, WA 99208	PET			\$173,321.50

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$173321.50

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**



# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER  
1400190

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
RANDLE COMMUNICATIONS, LLC

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SOUTHWEST AIRLINES DALLAS, TX 75235	MTG			\$650.94

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$650.94

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**FPPC Form 460 (June/01)**  
**FPPC Toll-Free Helpline: 866/ASK-FPPC**

# Schedule H – Loans Made to Others\*

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE H

Statement covers period from 01/01/2018 through 03/31/2018	<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER  
1400190

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR  PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		<b>SUBTOTALS</b>						

(Enter (e) on  
Schedule I, Line 3)

## Schedule H Summary

1. Loans made this period .....  
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans .....  
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) ..... **NET**  
(Enter the net here and on the Summary Page, Column A, Line 7.)

\*\* If Required

# Schedule I

## Miscellaneous Increases to Cash

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period  
from 01/01/2018  
through 03/31/2018

**CALIFORNIA FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
HOMEOWNERSHIP FOR FAMILIES AND TAX SAVINGS FOR SENIORS, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS

I.D. NUMBER  
1400190

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
3/19/2018	WAYNE L. ORDOS ATTORNEY AT LAW SACRAMENTO, CA 95814	CAMPAIGN SOFTWARE REFUND	\$2,500.00

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$2,500.00

### Schedule I Summary

1. Increases to cash of \$100 or more this period.....	\$2,500.00
2. Unitemized increases to cash under \$100 this period. ....	\$0.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).).....	\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....	<b>TOTAL</b> \$2,500.00

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC